

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit : Customer No.: 035811  
Examiner :  
Serial No. : 10/523,675  
Filed : February 2, 2005  
Inventors : Daniel LeComte Docket No.: BMA-05-1018  
: Pierre Sarda  
Title : DEVICE FOR SCRAMBLING MPEG-4- Confirmation No.:  
: TYPE AUDIO-VISUAL AND  
: MULTIMEDIA CONTENT  
Dated: March 28, 2005

**Mail Stop PCT**

Commissioner for Patents  
P.O. Box 1450  
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Sir:

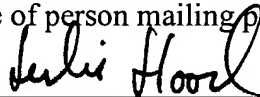
**37 CFR 1.10**  
**EXPRESS MAIL CERTIFICATION**

"Express Mail" mailing label number: EV 548523549 US 15  
Date of Deposit: March 28, 2005  
DESCRIPTION OF CONTENTS: Postcard, an Amendment Transmittal Letter, in duplicate, a Preliminary Amendment and the English translation of the Specification.

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to **Mail Stop PCT**, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Attorney Docket No.: BMA-05-1018

In re Application of Daniel LeComte et al.

Serial No.: 10/523,675

Filed: February 2, 2005

For: DEVICE FOR SCRAMBLING MPEG-4-TYPE AUDIO-VISUAL AND MULTIMEDIA CONTENT

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Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

\_\_\_ Small entity status of this application under 37 CFR §1.9 and §1.27 has been established.

\_\_\_ A verified statement to establish small entity status under 37 CFR §1.9 and §1.27 is enclosed.

x No additional fee is required.

The fee has been calculated as shown below:

(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR		
TOTAL	*18	- **20 =	0	
INDEP.	* 2	- ** 3 =	0	
Application Size Fee				
First Presentation of Multiple Dependent Claim				

RATE	ADD'L FEE
x 25 =	\$
x 100 =	\$
	\$
+ 180 =	\$

OR

RATE	ADD'L FEE
x 50 =	\$
x 200 =	\$
x 250 =	\$
+ 360 =	\$

TOTAL ADDITIONAL FEE \$\_\_\_\_\_ OR \$\_\_\_\_\_

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

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The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

\_\_\_ Please charge my Deposit Account No. 50-2719 in the amount of \$\_\_\_\_\_. A duplicate copy of this sheet is enclosed.


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  x   The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-2719. A duplicate copy of this sheet is enclosed.

  x   Any filing fees under 37 CFR §1.16 for the presentation of extra claims.

  x   Any patent application processing fees under 37 CFR §1.17 with the exception of the Issue Fee which we intend to pay by check.

Respectfully submitted,

  
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